Case 16-08070 Doc 1 Fill in this information to identify your case:	Filed 03/09/16	Entered 03/09/16 08:59:10 age 1 of 66	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name Write the name that is on	Don First name	First name
your government-issued picture identification (for example, your driver's	Middle name Hawkins	Middle name
license or passport Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last	First name	First name
8 years Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX- 4303 OR 9 XX - XX-	xxx - xx- OR 9 xx - xx-

Doc 1 Filed 03/49/9/116 Entered 03/09/16/08:59:10 Desc Main Debtor 1 Don Page 2 of 66 Document ** **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 416 W. 34th Street, Apt. 202 Number Street Number Street Illinois 60475 Steger Zip Code City State City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Part 2: Tell the Court About Your Bankruptcy Case

Tell the oddit Abe	out lour Ballkruptcy Case							
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13							
8. How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 							
9. Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When	MM / DD / YYYY	Case number Case number Case number				
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known				
11. Do you rent your residence?	No. Go to line 12.	ed an eviction judgment against you Statement About an Eviction Judgm y petition.	·					

<u>Case 16-0807</u>0 Doc 1 Filed 03/49/9/116 Entered 03/09/16/08:59:10 Desc Main Page 4 of 66 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 I am not required to receive a briefing about cred	ľ
counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 66 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Don Hawkins Signature of Debtor 2 Signature of Debtor 1 3/9/2016 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

rect.				
/s/ Danielle Kancherlapalli		Date	3/9/2016	
Signature of Attorney for Debtor	_		MM / DD / YYYY	
Danielle Kancherlapalli				
Printed name				
Semrad Law Firm				
Firm name				
	11101 S. Western Aven	iue		
Number	Street			
Chicago	Illinois		60	643
City	State		Zip	o Code
Contact phone		Er	nail address	
		<u>Illi</u>	nois	<u></u>
Bar number		St	ate	

<u> Case 16-08070 Doc 1 Filed 03/09/16 Fntered 03/0</u>9/16 08:59:10 Desc Main Fill in this information to identify your case: Debtor 1 Hawkins Don First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$16,250.00 1b. Copy line 62, Total personal property, from Schedule A/B \$16,250.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$28,245.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$52,673.96 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$24.836.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$105,754.96 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3,355,65 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,905.00

Case 16-08070 Doc 1 Filed 03/49/9/116 Entered 03/09/16/08:59:10 Desc Main Debtor 1 Page 9 of 66 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,754.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$51,467.96 9a. Domestic support obligations (Copy line 6a.) \$1,206.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$0.00

\$0.00

\$0.00

\$52,673.96

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

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Fill in this	information to identify your case:					
Debtor 1	Don		Hawk	ins		
	First Name	Middle	Name Last N	lame		
Debtor 2	if filing)					
Spouse,	if filing) First Name	Middle	Name Last N	lame		
Jnited St	ates Bankruptcy Court for the:	Northern	District of II	linois State)		
Case nun If known)						
Officia	al Form 106A/B					Check if this is an amended filing
	dule A/B: Proper	ty				12
ategory vesponsib rite your Part 1:	where you think it fits best. Be ole for supplying correct inform name and case number (if kno	as complete and nation. If more s wn). Answer ev e, Building,	d accurate as possible. Is pace is needed, attach ery question. Land, or Other Rea	n asset fits in more than one categor If two married people are filing toge a separate sheet to this form. On the I Estate You Own or Have an	ether, both are equipment of the top of any add	ually
. Do you	u own or nave any legal or equi	table interest in	i any residence, building	, iand, or similar property?		
	Yes. Where is the property?					
	res. Where is the property:		What is the property	? Check all that apply Do no	ot deduct secured c	laims or exemptions. Put
1.1			Single-family home	the ar	mount of any secure	ed claims on <i>Schedule D:</i>
	Street address, if available, or o	ther description	Duplex or multi-uni	Crea	itors Who Have Cla	nims Secured by Property.
			Condominium or co		ent value of the property?	Current value of the portion you own?
			Manufactured or m	obile home		————
	Number Street		Land	Dage	uiba tha matuua af	varu avmanahin
	Number Street		Investment property	, Desc intere	ribe the nature of est (such as fee si	your ownersnip mple, tenancy by
	City State	Zip Code	Timeshare Other	the e	ntireties, or a life	estate), if known.
	Oity State	Zip Code	Ш			
						mmunity property
			Debtor 1 only	□'	see instructions)	
			Debtor 2 only			
			Debtor 1 and Debto	•		
				debtors and another		
				u wish to add about this item, such	n as local	
			property identification	n number:		
If you	own or have more than one, list he	ere:	What is the property	2 Chapte all that apply	-t dadi iot acci irad a	laima ar avametiana Dut
1.2			What is the property Single-family home	the or		laims or exemptions. Put ed claims on <i>Schedule D:</i>
1.2	Street address, if available, or o	ther description	Duplex or multi-uni	Crea	itors Who Have Cla	nims Secured by Property.
			Condominium or co	•	ent value of the	Current value of the
			Manufactured or m	entire	e property?	portion you own?
			Land			
	Number Street		Investment property	Desc	ribe the nature of	your ownership
			Timeshare	intere	est (such as fee si ntireties, or a life	
	City State	Zip Code	Other		ritireties, or a me	———
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	in the manner of Observance		
					Check if this is co see instructions)	mmunity property
			Debtor 1 only	Ц,	,	
			Debtor 2 only	or 2 only		
			Debtor 1 and Debto			
				debtors and another		
			Other information yo property identification	u wish to add about this item, sucl on number:	n as local	

	Don Case 16-080 First Name	070 Doc 1 Middle Name	Filed 03/409/116 Entered 03/409/116 Document Page 11 of 66	6/08;59: <u>10 Des</u>	<u>c Main</u>
_	reet address, if available, or ot		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property?	d claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Cit		 Zip Code	Investment property Timeshare Other	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	ave attached for Part 1. Wri	[[[ition you own for all te that number here	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, soroperty identification number: I of your entries from Part 1, including any entries for the solution of the property identification of the property? Check one.	or pages	mmunity property
Part 2: Do you d	Describe Your Vehiclo own, lease, or have legal or o		any vehicles, whether they are registered or not? In	nclude any vehicles	
ou own to B. Cars, v		u lease a vehicle, also	report it on Schedule G: Executory Contracts and Unexp		
3.1	Make Model: Year: Approximate mileage: Other information:	Kia Optima 2013 99000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure	laims or exemptions. Put ad claims on Schedule D: hims Secured by Property. Current value of the
	2013 Kia Optima 99000 mile	es	At least one of the debtors and another Check if this is community property (see instructions)	\$13825.00	portion you own? \$13825.00

Debtor 1	Don Case 16-08070 Doc 1 First Name Middle Name	Filed 03/09/16 Entered 03/09/16	6/08:59: <u>10 Des</u>	c Main			
3.3	Make	Documeritie Page 12 of 66 Who has an interest in the property? Check	Do not deduct secured cl				
	Model:	one.	the amount of any secured claims on Schedule D:				
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.			
	Approximate mileage:	Debtor 2 only	Current value of the Current value of the				
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?			
		At least one of the debtors and another					
		Check if this is community property (see					
		instructions)					
3.4		Who has an interest in the property? Check	Do not deduct secured cl	•			
	Model:	one.	the amount of any secured claims on Schedule D:				
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.			
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the			
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?			
		At least one of the debtors and another					
		Check if this is community property (see instructions)					
4.1		Who has an interest in the property? Check	Do not deduct secured cl	•			
	Model:	one.	the amount of any secured claims on <i>Schedule D:</i>				
	Year:	Debtor 1 only	Creditors who Have Cla	ims Secured by Property.			
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the			
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?			
		At least one of the debtors and another					
		Check if this is community property (see instructions)					
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	•			
	Model:	one.	the amount of any secure				
	Year: Approximate mileage:	Debtor 1 only	Creditors who Have Cla	Creditors Who Have Claims Secured by Property.			
		Dobtor 2 only	Command value of the	ine decared by 1 reporty.			
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the			
	Other information:	Debtor 1 and Debtor 2 only	entire property?	, , ,			
	···			Current value of the			
	···	Debtor 1 and Debtor 2 only		Current value of the			
	Other information: d the dollar value of the portion you own for a	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	entire property? for pages	Current value of the			

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Describe Your Personal and Household Items

D	o you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	6. Household goods	and furnishings	
		iances, furniture, linens, china, kitchenware	
г	No		
	Yes. Describe	Used Furniture	•
ľ	Teo. Describe	Osed i difficile	\$500.00
	collections	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music s; electronic devices including cell phones, cameras, media players, games	
$ \leq $	No		
L	Yes. Describe		
₹ •	•	ue und figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles	
Г	Yes. Describe		
Г			
9		orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
$\overline{\mathbf{V}}$	No		
Г	Yes. Describe		
·	No	es, shotguns, ammunition, and related equipment	
L	Yes. Describe		
·	11. Clothes Examples: Everyday o	clothes, furs, leather coats, designer wear, shoes, accessories	
$\overline{\mathbf{V}}$	Yes. Describe	Used Men's Clothing	\$375.00
			-
	12. Jewelry Examples: Everyday je gold, silve	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, r	
$\overline{\mathbf{V}}$	No		
Ē	Yes. Describe		
	- 13. Non-farm animals Examples: Dogs, cats No		
Ė	Yes. Describe		
L	res. Describe		
	14. Any other person	al and household items you did not already list, including any health aids you did not list	
V	No		
	Yes. Describe		
		has dell'alla faranza matrica france Bord O. L. I. II.	
		lue of all of your entries from Part 3, including any entries for pages you have attached number here	\$875.00

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First Name Middle Name Docume Hit Page 14 of 66

Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: MB Financial \$550.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Deb	tor 1	Don Case 16 First Name	5-08070	Doc 1	Filed 03/99/16 Document	<u>Entered</u> 03/09/16 08:5 Page 15 of 66	9: <u>10 Desc</u>	Main
20.	Neg Non	vernment and corpo totiable instruments in negotiable instrumen						
		Yes. Give specific information about them	Issuer name:	:				
21.	Exa	irement or pension mples: Interests in IR No		ogh, 401(k), 4	03(b), thrift savings accour	ts, or other pension or profit-sharing p	ans	
		Yes. List each	Type of acco	unt:	Institution name:			
		account separately.	401(k) or sin	nilar plan:				
			Pension plan	1:				
			IRA:		·			
			Retirement a	account:	·			
			Keogh:		·			
			Additional ac					
22	Soo	urity deposite and n	Additional ac	count:				
22.	Your Exa		leposits you ha		nat you may continue service public utilities (electric, gas	e or use from a company water), telecommunications		
	✓	No			Institution name:			
		Yes	Electric:		Institution name:			
			Gas:					
			Heating oil:					
			_	osit on rental (unit:			
			Prepaid rent	:				
			Telephone:					
			Water:					
			Rented furnit	ture:				
			Other:					
23.	Ann	uities (A contract for	a periodic pay	ment of mone	ey to you, either for life or for	a number of years)		
		No Yes	Issuer name	and description	on:			

Debt	or 1	Don First Na		<u>se 1</u>	6-08070	Doc 1 Middle Name		03/09/16 cumethe	Entered 0 Page 16 of		Desc Main
24.					ntion IRA, in a o, 529A(b), and		a qualifie	d ABLE progra	m, or under a qu	alified state tuition program.	
		No Yes		nstitutio	on name and c	description. Sep	parately file	the records of a	ny interests.11 U.\$	S.C. § 521(c):	
25.			-		uture interes penefit	ts in property	(other the	an anything lis	ed in line 1), and	d rights or powers	
		Yes. [Descri	be							
26.	Еха	amples: No		et dom				intellectual proyalties and licens			
27.		amples: No		ing per		eneral intangil e licenses, coo		ssociation holdin	gs, liquor licenses	s, professional licenses	
Mor	ney (or pr	oper	ty ov	ved to you	?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax	refunc	ds ow	ed to y	ou .						
		Yes. G a y	about to	hem, ir eady fil	nformation ncluding wheth ed the returns ears	er				Federal: State: Local:	
29.		nily su _l mples:		ue or lu	ump sum alimo	ony, spousal su	oport, child	support, mainte	nance, divorce set	tlement, property settlement	
	✓	No			nformation	,,,,,				Alimony:	
		100. 0	avo op	000	THO THAIL OF THE					Maintenance:	·
										Support:	
										Divorce settlement	
30.	Othe	er amo	ounts	some	one owes you					Property settlemen	t:
		mples:	Unpai	d wage	es, disability ins			-	pay, vacation pay,	workers' compensation,	
		No Yes. D	escrib	e							

Deb	tor 1	Don Case 10 First Name	6-08070	Doc 1 Middle Name	Filed 03/09/116 Document	Entered 03/09/6	L6 (08;59: <u>10 D</u>	esc Main
31.		rests in insurance mples: Health, disab	•	rance; health		edit, homeowner's, or renter	r's insurance	
		No Yes. Name the insur of each policy and li		,	Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trus		meone who has died ceeds from a life insurance p	policy, or are currently entitle	d to receive	
33.					u have filed a lawsuit or mance claims, or rights to sue	ade a demand for paymer	nt	
		No Yes. Describe						
34.		er contingent and et off claims	unliquidated	claims of e	very nature, including co	unterclaims of the debtor	and rights	
	H	No Yes. Describe						·
35.	_	financial assets yo	ou did not alre	ady list				
		Yes. Describe						
36.			-			es for pages you have att		\$550.00
Part	5:	Describe Any E	Business-R	elated Pro	pperty You Own or Ha	ave an Interest In. Lis	st any real estate i	n Part 1.
37.					est in any business-relate		•	
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Acc	ounts receivable o	r commission	s you alread	ly earned			
	=	No Yes. Describe						
39.		ce equipment, furr mples: Business-rela			nodems, printers, copiers, fa	x machines, rugs, telephone	s, desks, chairs, electron	ic devices
		No Yes. Describe						

	First Name	6-08070	Doc 1 Middle Name	Filed 03/09/16 Document	Entered 03/09/1 Page 18 of 66	16 ∩08 08 059: <u>10</u> D	esc Main
40.	Machinery, fixtures, eq	juipment, sup	plies you use	in business, and tools	of your trade		
	✓ No						
	Yes. Describe						
41.	Inventory						
	✓ No						
	Yes. Describe						1
42.	Interests in partnersh	ips or joint ve	entures				4
	✓ No						
	Yes. Give specific		Na	ame of entity:		% of ownership:	
	information about						
	them						
			_				
43. C	Customer lists, mailing	lists, or other	compilations				
	✓ No	•	·				
	=	clude personal	lv identifiable in	formation (as defined in 1	1 U.S.C. § 101(41A))?		
		,	,	(3 (, , , .		
	∐ No						
	Yes. Descr	ibe					
44.	Any business-related p	property you d	lid not already	list			
	✓ No						
	Yes. Give specific						
	information		_				<u> </u>
			_				
						_	
		•			for pages you have attach		
Part	Describe Any F If you own or have an	Farm- and C	Commercial	Fishing-Related Plart 1.	roperty You Own or H	lave an Interest In	ı.
46.	Do you own or have a	ny legal or eq	uitable interes	st in any farm- or comm	ercial fishing-related prop	erty?	
	✓ No. Go to Part 7.	·					Current value of the
	Yes. Go to line 47.						portion you own? Do not deduct secured
	_						claims
							or exemptions
47.	Farm animals Examples: Livestock, po	ultrv. farm-raise	ed fish				
		j, railii raioc					
	✓ No						1
	Yes. Describe						

Deb	tor 1	Don Case 16 First Name	6-08070	Doc 1	Filed 03/09/1		3/09/16/08:59: <u>10</u> 66	Desc	<u>Main</u>
48.	Cro	ps-either growing	or harvested	I	2000	. ugo 20 0.			
	✓	No							
		Yes. Describe						_	
49.	Fari	m and fishing equi	pment, imple	ements, mach	inery, fixtures, and to	ols of trade			
	✓	No							
		Yes. Describe							
50.	Fari	m and fishing supp	lies, chemic	als, and feed					
		No							
	Ш	Yes. Describe						-	
51.		farm- and comment farm- and co			ty you did not alread	/ list			
	✓	No							
		Yes. Describe						_	
			-		6, including any entri				
Part					ave an Interest in	That You Did No	t List Above		
53.	Do y Exai	ou have other promples: Season tickets	perty of any l s, country club	kind you did r membership	not already list?				
	✓								
	_	Yes. Give specific							
		information							
54 A	dd th	e dollar value of al	l of your entr	ios from Part	7 Write that number	here			
J4. A	uu iii	le dollar value or ar	i or your end	ies iroin r art	7. Write that number	nere		.	
Part	8:	List the Totals	of Each Pa	art of this F	orm				
55	Dart 1	· Total roal octato	lino 2						
55. 1	art i	. Total real estate,							
56.	oart 2	total vehicles, line	: 5		\$1382	5.00			
57. P	art 3	: Total personal an	d household	items, line 15	\$875.0	00			
58. P	art 4	: Total financial ass	ets, line 36		\$550.	00			
59. I	Part 5	i: Total business-re	elated proper	rty, line 45	_				
60. I	Part 6	: Total farm- and f	ishing-relate	d property, lir	ne 52	_			
61. I	Part 7	: Total other prope	erty not listed	d, line 54					
62.	Γotal	personal property.	Add lines 56 t	through 61		0.00			+ \$15250.00
							Copy personal property to	otal ►	
62 T	otal a	of all property on S	chodulo A/R	Add ling 55 .	lino 62				\$15250.00

Filli	in this inform	Case 16-08070 ation to identify your case:	Doc 1 Filed 03/	09/16 Entered 03/0	9/16 08:59:10	Desc Main
	otor 1	Don First Name	Middle Name	Hawkins Last Name		
	otor 2 ouse, if filing)		Middle Name	Last Name		
Unit	ted States Ba	ankruptcy Court for the:	Northern D	District of Illinois		
	se number nown)			(State)		
Of	ficial F	Form 106C			1	Check if this is a amended filing
		_	erty You Claim	as Exempt pple are filing together, both		12/1
For is to exer rece exer prop	each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set	additional pages, writer of property you class pecific dollar amount to the amount of an in benefits, and tax-out 100% of fair market etermined to exceed of the Property You of exemptions are you cleed claiming state and federal eclaiming federal exemptions.	im as exempt, you must as exempt. Alternative applicable statutory exempt retirement functivalue under a law that that amount, your exempt retirement functions. Claim as Exempt retirement aiming? Check one only, even nonbankruptcy exemptions. 11 ins. 11 U.S.C. § 522(b)(2)	umber (if known). st specify the amount of rely, you may claim the full limit. Some exemptionsds—may be unlimited in a limits the exemption to emption would be limited in if your spouse is filing with you.	the exemption you ull fair market value—such as those for dollar amount. How a particular dollar at the applicable s	r health aids, rights to wever, if you claim an amount and the value of the
		ription of the property an lle A/B that lists this prop		Amount of the exemption yo Check only one box for each ex	·	cific laws that allow exemption
			Copy the value from Schedule A/B			
	Brief description	: MB Financial	\$550.00	▽		735 ILCS 5/12-1001(b)
	Line from Schedule A		<u> </u>	\$550.00 100% of fair market value, u applicable statutory limit	_	
	Brief description	Used Furniture	\$500.00	✓		735 ILCS 5/12-1001(b)
	Line from Schedule A		<u> </u>	\$500.00 100% of fair market value, u applicable statutory limit		
3.	(Subject to	adjustment on 4/01/16 and e	• •	5? es filed on or after the date of adjus n 1,215 days before you filed this c	,	

No Yes

Debtor 1 Don Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main

First Name Middle Na

06

Schedule A/B:

Documetne 1

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Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$375.00 $\overline{\mathbf{V}}$ **Used Men's Clothing** description: \$375.00 Line from 100% of fair market value, up to any Schedule A/B: 11 applicable statutory limit 735 ILCS 5/12-1001(c); 735 ILCS 2013 Kia Optima 99000 Brief \$13,825.00 5/12-1001(b) description: miles Line from 100% of fair market value, up to any Schedule A/B: 03 applicable statutory limit 735 ILCS 5/12-1001(b) Brief **Bedroom/Living Room** \$1,000.00 description: Sets Line from 100% of fair market value, up to any

applicable statutory limit

	Case 16-08070	Doc 1	Filed 03/09/16	Entered 03/09	/16 08:59:10	Desc Main	
Fill in this	information to identify your case:			J			
Debtor 1	Don		Hawki	ns			
	First Name	Midd	le Name Last N				
Debtor 2 (Spouse, i	if filing) First Name	Midd	le Name Last N	ame			
		iviida	Lastre	arrio			
United Sta	ates Bankruptcy Court for the: N	orthern	District of III	inois State)			
Case num (If known)	nber		(-				
Officia	al Form 106D						neck if this is a nended filing
Sche	dule D: Creditor	rs Wh	o Have Clair	ns Secured	by Prope	rtv	12/1
	omplete and accurate as point information. If more space				-		
	n the top of any additional			• .		les, and attach it t	o mis
	•		•	ase number (ii kiii	owny.		
	Iny creditors have claims securedNo. Check this box and submit this f		•	s Vou have nothing else	to report on this form		
	Yes. Fill in all of the information belo		ourt with your other scriedule	s. Tou have nothing else	to report on this form.		
		vv.					
	List All Secured Claims						
	all secured claims. If a creditor has i. If more than one creditor has a pai					Column B	Column C
	ible, list the claims in alphabetical or			art 2. As much as	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
•	•		·		value of collateral.	claim	If any
2.1 Santa	ander Consumer USA				\$23,071.00	\$13,825.00	\$9,246.00
	tor's Name	Describe	the property that secures	the claim:			
	Box 961245 umber Street	_	Optima 99000 miles Value: S	•			
			date you file, the claim is:	Check all that apply.			
Fort	Worth Texas 76161	Conti	·				
Ci			uidated				
Who	owes the debt? Check one.	Dispu					
✓ [Debtor 1 only	Nature of	lien. Check all that apply.				
	Debtor 2 only		reement you made (such as	mortgage or secured			
	Debtor 1 and Debtor 2 only	car lo	•				
	At least one of the debtors and another		ory lien (such as tax lien, me	ecnanic's lien)			
	Check if this claim relates to a		nent lien from a lawsuit (including a right to offset)				
	community debt	L Oulei	(including a right to onset) _				
Date	debt was incurred 11/1/2012	Last 4 dig	jits of account number	1000			
	EPTANCE NOW	Describe	the property that secures	the claim:	\$5,174.00	\$1,000.00	\$4,174.00
	tor's Name I Headquarters Dr				ı		
	umber Street		Living Room Sets Value: \$1				
		Conti	date you file, the claim is:	Спеск ан шасарру.			
Plane	o Texas 75024		·				
Ci			uidated				
	owes the debt? Check one.	☐ Dispu					
	Debtor 1 only	_	lien. Check all that apply.				
	Debtor 2 only		reement you made (such as	mortgage or secured			
	Debtor 1 and Debtor 2 only	car lo	•	oboniala lion)			
	At least one of the debtors and another		ory lien (such as tax lien, me	echanics lien)			
	Check if this claim relates to a		nent lien from a lawsuit				
	community debt	_	(including a right to offset) _	4546			
Date	debt was incurred 4/1/2015	Last 4 dig	jits of account number	1548			
	Add the dollar value of you	ır entries ir	Column A on this page	Write that number	\$28,245,00		

here:

Debtor 1 Don Hawkers First Name Middle Name Last Name Debtor 2 (Sproses, #Filing) First Name Middle Name Last Name United States Bankruptory Count for the: District of Illinois.			Case 16-08070	Doc 1	Filed	03/09/16	Entered 0	<mark>13/0</mark> 9/16 08:59:1	LO Desc	Main	
Debtor 2 [Source, Iffining) First Name	Fill in	this informa	ation to identify your case:				_ 				
Delibro 2 Secours of things Frist Name Middle Name Last Name	Debto	or 1		NAC LUL	None			_			
United States Berkruptey Court for the: Northern	Debto	or 2	First Name	IVIIdale	e iname	Lastin	ame				
Creek number Check if this is an amended filing Check if this is an amended filin		—	First Name	Middle	Name	Last N	ame	_			
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Se as complete and accurate as possible. Use Part 1 for creditors with PRIORITY dating and Part 2 for creditors with Notice of the Common Color of the Color of t	United	d States Ba	nkruptcy Court for the:	Northern				_			
Schedule E/F: Creditors Who Have Unsecured Claims So as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other sarty to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AS: Property (Official Form hard year) and produce the country of the contract of the country of t							•				
Sas complete and accurate as possible. Use Part 1 for creditors with PRIDERTY claims and Part 2 for creditors with NORPRIDERTY claims. List the other work to any security contracts on unexpriced leases that could result in a calcium, Allo lists executary contracts on Schedule AIP. Property (Official Form 1066). Do not include any creditors with partially secured claims that related in Schedule Dr. Creditors With Poldic Claims that the continuation Page to this page. On the top of any additional pages, write your name and case number (if known). PARTY: List AII of Your PRIORTY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, is the creditor separately for each claim listed, identify what ye of claim is it. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and onception priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list that claim here and show both priority and onception holds an particular claim, let the other creditors in Part 3. (For an explanation of each type of claim is, if a claim has both priority amounts, let the other creditors in Part 3. (For an explanation of each type of claims, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount with the other creditors in Part 3. (For an explanation of each type of claims, see the instruction booklet.) Total claim Priority Nonpriority amount with the other creditors in Part 3. Total claim Priority Nonpriority amount with the other creditors in Part 3. Total claim Priority Nonpriority Nonpriority amount with the other creditors in Part 3. Total claim Priority Nonpriority Nonpriority Nonpriority Nonpriority Nonpriority Nonpriority Condition's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply.									Chec	k if this is an	n amended filing
party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 6: Exercitory Contracts and Unexpired Leases (Official Form 1665), bo not include any creditors with partially secured claims that reliated in Schedule 6: Conditions With Policy Conditions and Unexpired Leases (Official Form 1665), but include any creditors with partially secured claims that he be also so that the first of the state of the Conditional Pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Dear	Scl	hedu	le E/F: Cred	ditors V	Vho	Have U	nsecure	ed Claims			12/15
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. V Yes. V Yes. 2 Lat all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is is fla claim has both priority and nonpriority amounts. Is that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Carpenter, Stacy	party t 106A/E are list the bo	o any exects) and on steed in Schools	cutory contracts or unex Schedule G: Executory (edule D: Creditors Who e left. Attach the Continu	pired leases th Contracts and I Hold Claims S lation Page to	at could r Unexpired ecured by this page	esult in a claim Leases (Official Property. If ma	Also list execut al Form 106G). Dore space is nee	tory contracts on <i>Sche</i> Do not include any cred eded, copy the Part you	dule A/B: Prop itors with parti need, fill it out	erty (Officia ally secured , number th	al Form d claims that ne entries in
No. Go to Part 2. Yes. Yes. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim has provided priority and nonpriority amounts. Is that claim has been priority unsecured claims. For each claim listed, identify what type of claim, is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetiacl order according to the creditor's name, line in the instruction booklet.						112					
identify whist type of claim its. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, is the claims is alphabetical order according to the recritior's name, I you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount		No. Go ✓ Yes.	o to Part 2.				rity unsecured cla	aim. list the creditor separ	ately for each cl	aim. For eac	ch claim listed.
Carpenter, Stacy	i F	identify what possible, lis Part 1. If mo	nt type of claim it is. If a clain t the claims in alphabetical ore than one creditor holds	m has both prior I order according s a particular cla	ity and nor g to the cre im, list the	npriority amounts editor's name. If y other creditors in	, list that claim he ou have more than Part 3.	re and show both priority an two priority unsecured	and nonpriority a	amounts. As	much as
Carpenter, Stacy	•	(FOI all exp	ianation of each type of cla	airi, see trie iristi	ructions to		HStruction bookle	i.)	Total claim		•
Priority Creditor's Name Unknown Number Street As of the date you file, the claim is: Check all that apply. Villa Park Illinois 60181 Contingent Viniquidated	D 41 C	`arpontor S	Stagu						\$0.00		
Number Street Number Street As of the date you file, the claim is: Check all that apply.					La	ast 4 digits of a	ccount number	<u> </u>	\$0.00	\$0.00	\$0.00
As of the date you file, the claim is: Check all that apply. Villa Park Illinois 60181 Contingent Contingent Unliquidated Disputed Disputed Disputed Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Disputed Other. Specify Other. Specify Springfield Illinois 62705 City State Zip Code Who incurred the debt? Check one. Disputed Disputed			Street		w	hen was the de	ebt incurred?	n/a			
Villa Park Illinois 60181	יו	Nullibei	Sireet		As	s of the date yo	u file, the claim	is: Check all that apply.			
City State Zip Code Unliquidated Disputed Disputed Disputed Disputed Disputed Disputed Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify No Yes Debtor 1 Claims for death or personal injury while you were intoxicated Other. Specify State Zip Code Who incurred the debt? Check one. Disputed Dispu	V	/illa Park	Illinois	60181		Contingent					
Debtor 1 only	C	City	State	Zip Code		Unliquidated					
Debtor 2 only	V [.					Disputed					
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offset? ✓ No Yes Last 4 digits of account number 7043 \$51,467.96 \$0.00 Priority Creditor's Name 100 S GRAND AV EAST Number Street Springfield Illinois 62705 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offset? ✓ No Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claim sor death or personal injury while you were intoxicated Other. Specify Other.	בו ב	=	•		Ty	pe of PRIORIT	/ unsecured cla	im:			
At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offset? No Yes Libert OF HEALTHCARE	Ļ		•		V	Domestic sup	port obligations				
Check if this claim relates to a community debt Is the claim subject to offset? ☐ No ☐ Yes Zel LDEPT OF HEALTHCARE Priority Creditor's Name 100 S GRAND AV EAST Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated intoxicated ☐ Check if this claim relates to a community debt ☐ Check if this claim	F		•	othor		Taxes and cer	tain other debts yo	ou owe the government			
Is the claim subject to offset? No Yes Other. Specify	F	=			. [ath or personal inj	ury while you were			
No Yes Yes	L			community del	ot	_					
Yes Last 4 digits of account number	18 [.	_	subject to offset?		L	Other. Specify	-		_		
Last 4 digits of account number 7043 \$51,467.96 \$0.00		=									
Priority Creditor's Name 100 S GRAND AV EAST When was the debt incurred? 7/1/2005 Number Street As of the date you file, the claim is: Check all that apply. Contingent Contingent Unliquidated Unliquidated Unliquidated Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No When was the debt incurred? 7/1/2005 As of the date you file, the claim is: Check all that apply. Unliquidated Unliquidated Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	<u>.</u> וו [כ כו		: UEAITUCADE						ΦE4 467.06	ΦE4 467.06	PO 00
As of the date you file, the claim is: Check all that apply. Springfield	— P	Priority Cred	ditor's Name		La	ast 4 digits of a	ccount number	7043	<u>фэ 1,467.9</u> 6	<u> фэ 1,467.9</u> 6	\$0.00
As of the date you file, the claim is: Check all that apply. Springfield Illinois 62705 Contingent Unliquidated					w	hen was the de	ebt incurred?	7/1/2005			
Springfield Illinois 62705 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	יו	Number	Sireet		As	s of the date yo	u file, the claim	is: Check all that apply.			
City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Vinliquidated Disputed Type of PRIORITY unsecured claim: ✓ Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	9	Springfield	Illinois	62705		Contingent					
✓ Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ✓ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☐ Other. Specify Type of PRIORITY unsecured claim: ✓ Domestic support obligations ☐ Claims of death or personal injury while you were intoxicated ☐ Other. Specify Other. Specify						Unliquidated					
Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Is the claim subject to offset? □ No Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify	V					Disputed					
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	<u>ו</u>		•		Ty	pe of PRIORIT	onsecured cla	im:			
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Ļ		•		V	Domestic sup	port obligations				
Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No	Ļ		•	othor	Ē	Taxes and cer	tain other debts yo	ou owe the government			
Is the claim subject to offset? Other. Specify	Ļ	=			Ē	Claims for dea	ath or personal inj	ury while you were			
✓ No	Ļ			community del	ot _	_	•				
		_	subject to offset?		L	Unier. Specify			_		
	L										

Debtor 1 Don Case 16-08070 First Name Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main Doc 1 Page 24 of 66 Document Metal time Part 1: Your PRIORITY Unsecured Claims - Continuation Page Total claim Priority Nonpriority After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. amount amount 2.3 Illinois Department of Human & Family Services \$0.00 \$0.00 \$0.00 - Last 4 digits of account number _ Priority Creditor's Name 509 S. 6th St. When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply.

; [] [] []	otor 2 only debtors and anoth im relates to a co	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: ✓ Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	-		
<u> </u>	 me	Last 4 digits of account number When was the debt incurred?	\$1,206.00	\$1,206.00	\$0.00
)]]]	otor 2 only debtors and anoth im relates to a co	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	-		

Filed 03/409/16 Entered 03/09/16 08:59:10 Desc Main Case 16-08070 Doc 1 Don Debtor 1 Document Page 25 of 66 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 City of Chicago Parking \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60602 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 FST PREMIER \$430.00 Last 4 digits of account number 0966 Nonpriority Creditor's Name 3820 N LOUISE AVE When was the debt incurred? 10/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 57107 SIOUX FALLS South Dakota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 IRS 1 \$9,635.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Philadelphia Pennsylvania 19101 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed V Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No

Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.4	MIDSTATE COLLECTION SO		\$1,025.00
7.7	Nonpriority Creditor's Name	Last 4 digits of account number 4540	\$1,025.00
	2009B Round Barn Rd	When was the debt incurred? 10/1/2010	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Champaign Illinois C4004	Contingent	
	ChampaignIllinois61821CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	- ·	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No	<u> </u>	
	=		
	Yes		
4.5	PLS Loan Store	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name 1900 Roosevelt Rd		
	Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Broadview Illinois 60155	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	-	✓ Other. Specify	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		
4.6	Santander Consumer USA	— Loot 4 digits of secount number	\$9,246.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	PO Box 961245 Number Street	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Fort Worth Texas 76161	= -	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No		
	Vac		
	I I IPS		

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Zip Code

State

collection agency agency here. Sim	y is trying to collect ilarly, if you have m	from you for a debt ore than one creditor	It your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection r for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you obts in Parts 1 or 2, do not fill out or submit this page.
Carpenter, Stacy			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Unknown			Line 2.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	et		Part 2: Creditors with Nonpriority Unsecured Claims
Villa Park	Illinois	60181	Last 4 digits of account number
City	State	Zip Code	
HARRIS & HARF	RIS LTD		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
111 W JACKSON	BLVD S-400		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	et		Part 2: Creditors with Nonpriority Unsecured Claims
CHICAGO	Illinois	60604	Last 4 digits of account number

City

Debtor 1 Don Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 (08:59:10 Desc Main First Name Document Page 28 of 66 Add the Amounts for Each Type of Unsecured Claim

	mounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. nounts for each type of unsecured claim.
	Total claims
Total claims from Part 1	6a. Domestic support obligations. 6a. \$51,467.96
	6b. Taxes and certain other debts you owe the 6b. \$1,206.00
	6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00
	6d. Other. Add all other priority unsecured claims. Write that 6d. \$0.00 amount here.
	6e. Total. Add lines 6a through 6d. 6e. \$52,673.96
	Total claims
Total claims from Part 2	6f. Student loans 6f. \$0.00
	6g. Obligations arising out of a separation agreement or divorce 6g. \$0.00 that you did not report as priority claims
	6h. Debts to pension or profit-sharing plans, and other similar 6h\$0.00 debts
	6i. Other. Add all other nonpriority unsecured claims. Write that 6i. \$24,836.00 amount here.
	6j. Total. Add lines 6f through 6i. 6j. \$24,836.00

	Ca	ase 16-0807	0 Doc 1 F	-iled 03/09	/16 F	Entered 03/	Ώ9/16 08:59	9∙10 г	esc Main	
Fill in thi		to identify your cas					0710 00:00	J.10 L	7000 Main	
Debtor 1	I Dor	1			Hawkins	J				
		t Name	Middle N	lame	Last Nam	e				
Debtor 2	_									
(Spouse	, if filing) Firs	t Name	Middle N	lame	Last Nam	е				
United S	States Bankru	ptcy Court for the:	Northern	Distri	ict of Illinoi	is				
					(State	e)				
Case nu (If known										
Offic	ial Fo	rm 106G					_			c if this is ar ded filing
Sche	edule (3: Execut	ory Contra	acts and	Une	xpired L	eases			12/1
space is case nun	needed, cop nber (if know you have a	oy the additional p wn). any executory		ber the entries, nexpired leas	and attach	h it to this page.	On the top of an	y additiona	correct information. If Il pages, write your na	
✓ \	res. Fill in all	of the information be	elow even if the conti	racts or leases ar	e listed on	Schedule A/B: Pr	roperty (Official Fo	rm 106A/B).		
			npany with whom y nstructions for this fo						is for (for example, renexpired leases.	nt,
	Person or co	ompany with who	n you have the con	tract or lease			State what the	contract or	lease is for	
2.1 Th	ne New Color	nies					Residential Lease	*		
Na	ame						Debtor is Lessee	,		
40	02 W 34th St						1 year residential	iease		
_	umber	Street								
St	teger	III	inois	60475						
Ci		Si	ate	Zip Code						

		Case 16-08070	Doc 1 Filed 0)3/09/16 Entered (03/09/16 08:59:10	Desc Main
Fill	in this inform	ation to identify your case		J		
De	btor 1	Don		Hawkins	_	
_		First Name	Middle Name	Last Name		
	btor 2 oouse, if filing)	First Name	Middle Name	Last Name	_	
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois		
	se number			(State)	_	
						Check if this is a amended filing
Oi	fficial F	orm 106H				amended ming
		e H: Your Co	debtors			12/1:
in th	ne boxes on ry question.	the left. Attach the Addi	tional Page to this page. O	•	ages, write your name and ca	e, fill it out, and number the entries ase number (if known). Answer
2.	Yes	last 8 vears. have vou li	ved in a community proper	rty state or territory? (Commu	unity property states and territori	es include Arizona, California, Idaho,
	Louisiana, N	•	to Rico, Texas, Washington,	• •		
			ouse, or legal equivalent live v	with you at the time?		
	☐ Ye		ate or territory did you live?	Fill	in the name and current addres	ss of that person.
		Name of your spouse, fo	rmer spouse, or legal equival	ent		
		Number Street				
		City	State	Zip Code		
3.	as a codeb	tor only if that person is	a guarantor or cosigner. I		e creditor on Schedule D (Off	the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> Jlumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in thi	is information to identify	your case:	-		9/16 08:	:59:10	Desc M	ain	
Debtor 1	Don	Docui	Hawkins	ige of or	- 00				
Depiol I	First Name	Middle Name	Last Name		-	,			
Debtor 2						Check if this			
(Spouse, if	filing) First Name	Middle Name	Last Name	Э	_	An ame	nded filing		
United Sta	tes Bankruptcy Court for the:	Northern	District of Illinoi		_		ement showing es as of the foll		petition chapter date:
Case numl (If known)	per		`	,	_	MM / D	D/YYYY	-	
Officia	al Form 106I								
Sched	dule I: Your Inc	ome							12
ages, w		e. If more space is neede se number (if known). A nt			heet to this fo	orm. On t	he top of a	iny a	dditional
1.	Fill in your employment information.		Debtor 1			Debtor 2			
		Employment status	✓ Employed			Employ	/ed		
	If you have more than one job,		Not Employ	yed		☐ Not En	nployed		
	attach a separate page with	Occupation	Supervisor			_			
	information about additional employers.	•				-			
		Employer's name	Atkore International 16100 South Lathrop Avenue Number Street Allied Tube and Conduit Corporation			-			
	Include part time, seasonal, or	Employer's address				Number Street			
	self-employed work.					Number Street			
	Occupation may include		Allieu Tube an	d Coriduit Cor	poration	_			
	student								
	or homemaker, if it applies.		Harvey	Illinois	60426				
			City	State	Zip Code	City	St	ate	Zip Code
		How long employed there?							
		0 , ,							
Part 2:	Give Details About I	Monthly Income							
Estimate are separ	-	date you file this form. If you ha	ave nothing to rep	oort for any line	e, write \$0 in the s	pace. Includ	e your non-filir	ng spo	use unless you
If you or y		re than one employer, combine tl	ne information for	all employers	for that person on	the lines bel	ow. If you nee	d more	e space, attach
				For	Debtor 1	For Debt			
		y, and commissions (before all culate what the monthly wage wo	. ,	2.	\$6,185.42			-	
3. Esti									
J. L3 (1	mate and list monthly overt	ime pay.	:	3	+ \$0.00			_	

Debtor 1 Don Case 16-08070 Doc 1 Filed 03/09/16 First Name Middle Name Documentame		ered @3/09/166 32 of 66	08.5	9: <u>10 Des</u>	<u>Mai</u>	<u>n</u>
Document	i age	For Debtor 1		or Debtor 2 or on-filing spouse		
Copy line 4 here	4.	\$6,185.42	=			
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$1,745.23				
5b. Mandatory contributions for retirement plans	5b.	\$371.06				
5c. Voluntary contributions for retirement plans	5c.	\$0.00				
5d. Required repayments of retirement fund loans	5d.	\$0.00				
5e. Insurance	5e.	\$30.98				
5f. Domestic support obligations	5f.	\$682.50				
5g. Union dues	5g.	\$0.00				
5h. Other deductions. Specify:	5h. +	\$0.00	+ _			
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$2,829.77	_			
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,355.65	_			
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
monthly net income.	8a.	\$0.00	_			
8b. Interest and dividends	8b.	\$0.00	_			
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive						
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	_			
8d. Unemployment compensation	8d.	\$0.00	_			
8e. Social Security	8e.	\$0.00	_			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	8f.	\$0.00				
8g. Pension or retirement income	8g.	\$0.00	_			
8h. Other monthly income. Specify:	8h. +	\$0.00	+			
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	Ė]	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$3,355.65	+]=	\$3,355.65
11. State all other regular contributions to the expenses that you list in Schedunclude contributions from an unmarried partner, members of your household, your relatives. Do not include any amounts already included in lines 2-10 or amounts that are not an expense.	depender					
Specify:					11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data,</i> if it applies					12.	\$3,355.65
		o aa	и арр.			Combined
13. Do you expect an increase or decrease within the year after you file this for No.	m?					monthly income
Yes. Explain:						

Fill in this info	Case 16-0807		3/09/16 Entered 03/0	9/16 08:59:10	Desc Mai	in
riii iii uiis iiii	ormation to identify your ca	SC.	J			
Debtor 1	Don		Hawkins			
	First Name	Middle Name	Last Name	Object Making		
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name	Last Name	Check if this is:		
(-1	37 I list ivallic	Middle Name	Lastivario	An amended filing		
United States	s Bankruptcy Court for the:	Northern	District of Illinois	A supplement sho	•	
Case numbe	r		(State)	expenses as of the	; lollowing date	
(If known)				MM / DD / YYYY		
O((, - , -)	L C 400 L			•		
<u> Jifficial</u>	Form 106J					
Schedi	ule J: Your Ex	(penses				12/15
If known). And Part 1: De 1. Is this a juick of the part 1: De 2. No. (Constitution of the part 1: De 2. Do you had be petter 2. The part 1: De 3. Do your 6: D	scribe Your Househoint case? Go to line 2 Does Debtor 2 live in a s No Yes. Debtor 2 must fill ave dependents? Debtor 1 and expenses include of people other	old eparate household?	ses for Separate Household of Debto Dependent's relationship to Debtor 1 or Debtor 2		Does deper with you?	
aepenaei	nts?					
Part 2: Es	timate Your Ongoing	Monthly Expenses				
	s of a date after the bank		ou are using this form as a suppl plemental Schedule J, check the			•
		cash government assistance it on Schedule I: Your Income			Y	our expenses
	al or home ownership ex for the ground or lot. 4.	penses for your residence. Ind	clude first mortgage payments and		4.	\$850.00
If not in	cluded in line 4:					
4a. Real	estate taxes				4a	\$0.00
4b. Prop	perty, homeowner's, or rente	er's insurance			4b.	\$23.00
4c. Hom	e maintenance, repair, and	upkeep expenses			4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

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		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$200.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$81.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$300.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$60.00
10. Personal care products and services	10.	\$80.00
11. Medical and dental expenses	11.	\$0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$150.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$50.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$111.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from	170	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes 20b.	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses 20d.	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

Debtor 1 Don	Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16/08/59:10	Desc Main	
First I	Alame Documentarie Page 35 of 66		
21. Other. Spec	fty:	21	\$0.00
22. Calculate y	our monthly expenses.		\$1,905.00
22a. Add lin	es 4 through 21.	_	\$0.00
22b. Copy li	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	_	\$1,905.00
22c. Add line	e 22a and 22b. The result is your monthly expenses.	22.	<u> </u>
23.Calculate v	our monthly net income.		
-	and A.C. (come a combined an agribble in a comp.) from Cabradula I	23a	\$3,355.65
236. Сору у	our monthly expenses from line 22 above.	23b	\$1,905.00
23c. Subtract your monthly expenses from your monthly income.			\$1,450.65
The re	sult is your monthly net income.	23c	_
24 Do vou exi	pect an increase or decrease in your expenses within the year after you file this form?		
	le, do you expect to finish paying for your car loan within the year or do you expect your		
mortgage p	payment to increase or decrease because of a modification to the terms of your mortgage?		
✓ No			
Yes			
	Explain here:		

page 3

	Case 16-0807	0 Doc 1 Filed 0:	2/00/16 Enter	<u>red 03/0</u> 9/16 08:59:10	Doog Main
Fill in this inforn	nation to identify your case		3/U9/Th File	en 03/09/16 08.59.10	Desc Main
Debtor 1	Don		Hawkins		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(Gidio)		
Official I	Form 106De	<u>C</u>			Check if this is a amended filing
Declarat	tion About a	n Individual De	btor's Sche	dules	12/1
f two married p	people are filing togethe	r, both are equally responsi	ble for supplying corre	ect information.	
Part 1: Sign	Below				ers, or both. 18 U.S.C. §§ 152, 1341,
Dia you pa	ay or agree to pay some	one who is NOT an attorney	to neip you till out bar	nkruptcy forms?	
✓ No					
Yes. I	Name of person		Attach Bankrupt Signature (Offici	tcy Petition Preparer's Notice, Decla ial Form 119).	ration, and
•	nalty of perjury, I declare are true and correct.	e that I have read the summa	ry and schedules filed	with this declaration and	
🗶 /s/ Don H	awkins		*		
Signature of	of Debtor 1		Signa	ature of Debtor 2	
Date 3/9/2	2016 /DD/YYYY		Date	MM/DD/YYYY	

Fill	in this inforr	Case 16-0807 nation to identify your case		Filed 03/09/16	Entered 03/	09/16 08:59:1	0 Desc Main	
	otor 1	Don		Hawkins				
	otor 2	First Name	Middle I					
		j) First Name	Middle I					
		Sankruptcy Court for the:	Northern	District of Illin (Sta				
	se number nown)							
Of	ficial l	Form 107				_	Check if this in amended filing	
			ial Affairs	for Individua	ls Filing 1	or Bankru	ptcy 1	2/1
spac	e is neede	d, attach a separate sho	eet to this form. On		pages, write you		plying correct information. If more nber (if known). Answer every quest	ior
1.	What is	your current marital st	atus?					
		rried married						
2.	During t	the last 3 years, have yo	ou lived anywhere o	other than where you live	now?			
	✓ No Yes	. List all of the places you	lived in the last 3 yea	ars. Do not include where yo	ou live now.			
	Dek	otor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there	
					Same as D	ebtor 1	Same as Debtor 1	
	Nun	nber Street		From	Number Stree	<u> </u>	From	
				_ То			To	
	City	State	Zip Code	_	City	State Zip	p Code	
					Same as D	ebtor 1	Same as Debtor 1	
	Nun	nber Street		From	Number Stree	<u> </u>	From	
				_ To			To	
	City	State	Zip Code	_	City	State Zip	p Code	
3.	territories i	nclude Arizona, California	a, Idaho, Louisiana, I	use or legal equivalent in Nevada, New Mexico, Puerl otors (Official Form 106H).			y? (Community property states and in.)	

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Page 38 of 66 Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Gross income Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$14278.54 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business ✓ Wages, commissions, Wages, commissions, \$84227.04 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015 Operating a business Operating a business Wages, commissions, Wages, commissions, \$84000.00 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details.

	Debtor 1		Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:					
For last calendar year: (January 1 to December 31,2015)					
For the calendar year before that: (January 1 to December 31,					

Debtor 1 Don Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main Document Page 39 of 66

Pa	rt 3:	List Ce	rtain Pa	yments Y	ou Made Before	You Filed for Ban	kruptcy		
6.	Are e	either Dek	otor 1's o	Debtor 2's	debts primarily con	sumer debts?			
					tor 2 has primarily o	consumer debts. Cons	umer debts are defined in 11	U.S.C. § 101(8) as "incurred	d by an individual primarily
		Durin	ng the 90 c	lays before y	ou filed for bankruptcy	, did you pay any credito	r a total of \$6,225* or more?		
			No. Go to	line 7.					
	Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
		* Sub	ject to adj	ustment on 4	/01/16 and every 3 ye	ars after that for cases fil	ed on or after the date of adju	stment.	
	✓ \	es. Debt	or 1 or D	ebtor 2 or b	oth have primarily o	consumer debts.			
		Durin	ng the 90 c	lays before y	ou filed for bankruptcy	, did you pay any credito	r a total of \$600 or more?		
			No. Go to	line 7.					
			Yes. List that	below each c	not include payments		re and the total amount you pa ligations, such as child suppo Inkruptcy case.		
						Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		Creditor's Number City		State	Zip Code				Mortgage Car Credit card Loan repayment Suppliers or vendors Other
		Creditor's	s Name					-	Mortgage
		Nimalana	Otan at						Car
		Number	Street						Credit card Loan repayment
									Suppliers or
		City		State	Zip Code				vendors
							-		Other Mortgage
		Creditor's	s Name						Car
		Number	Street						Credit card
									Loan repayment
		City		State	Zip Code				Suppliers or vendors
		Jity		Olalo	21p 3000				Other

Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main Doc 1 Debtor 1 Document Page 40 of 66 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? 7. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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First Name Documering Page 41 of 66

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes

	such matters, includ	filed for bankruptcy, w ing personal injury cases						stody modifications, and contract
	lo es. Fill in the details.							
			Nature o	of the case	Court or age	ency		Status of the case
	Case title							Pending
					Court Name			On appeal
	Case number				Number Stre	ot		Concluded
					Number Site	Cl		_
					City	State	Zip Code	_
	Case title							Pending
					Court Name			On appeal
	Case number				Number Stre	et		- Concluded
					-			_
					City	State	Zip Code	
	Creditor's Name			Describe the prop			Date	Value of the property
	Number Street							
	Trained Circuit			Property was re	enossessed			
				Property was for				
				Property was g	arnished.			
	City	State Zip Co	ode	Property was a	ttached, seized, or	levied.		
				Describe the prop	erty		Date	Value of the property
	Creditor's Name							
				Explain what happ	pened			
	Number Street							
				Property was re	epossessed.			
				Property was fo				
				Property was g	arnished.			
	City	State Zip Co	ode	Property was a	ttached, seized, or	levied.		

Debt	or 1	Don Case 16-08070 First Name			<u>Entered</u>	: <u>10 Desc</u>	<u>Main</u>
11.		nin 90 days before you filed for bounts or refuse to make a payme	bankruptcy, did any	creditor, including	a bank or financial institution, set o	off any amounts f	rom your
		No Yes. Fill in the details.					
				Describe the action	on the creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of acco	ount number: XXXX-		
		City State	Zip Code				
		nin 1 year before you filed for ba iver, a custodian, or another offi		f your property in t	he possession of an assignee for th	ne benefit of cred	itors, a court-appointed
	V	No					
Part	└ 5:	^{Yes} List Certain Gifts and Cor	ntributions				
13.				give any gifts with	a total value of more than \$600 per	person?	
	✓	No Yes. Fill in the details for each gif	ft				
		Gifts with a total value of more per person		Describe the gifts	5	Dates you gave the gifts	Value
		Person to Whom You Gave the Gif	ft				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the Gif	ft				
		Number Street					
		City State Person's relationship to you	Zip Code				
							I

		FIRST Name	Middle Name	Document Page 43 of 66		
14.	With	nin 2 years before you	filed for bankruptcy, did	you give any gifts or contributions with a total value of more	e than \$600 to ar	y charity?
	✓	No Yes. Fill in the details for	r each gift or contribution.			
	_	Gifts with a total value per person	-	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name				
		Number Street				
Dont	· C:	City Si	tate Zip Code			
15.	With			nce you filed for bankruptcy, did you lose anything because o	of theft, fire, othe	r disaster, or
	$\overline{\mathbf{A}}$	No Yes. Fill in the details.				
		Describe the property how the loss occurred	-	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
				insurance claims on line 33 of Schedule A/B: Property.		
		_ist Certain Payme			. ———	
16.	seek Includ	ing bankruptcy or prep	oaring a bankruptcy pet	ou or anyone else acting on your behalf pay or transfer any pition? credit counseling agencies for services required in your bankruptcy		ie you consulted about
				Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm Person Who Was Paid 20 South Clark Street 20 Number Street	8th Floor	Semrad Law Firm - \$350.00	3/8/2016	\$350.00
		Chicago III	inois 60606			
			tate Zip Code			
		Email or website address Person Who Made the F				
		Person Who Was Paid				
		Number Street				
		City St	tate Zip Code			
		Email or website address	ss			
		Person Who Made the F	Payment, if Not You			

Debtor 1 Don Case 16-08070 Doc 1 Filed 03/09/166 Entered 03/09/166 (08:59:10 Desc Main

	Ī	Don Case 16- First Name	00010	Doc 1 Middle Name		nugue Turigue	Entered 03/4 Page 44 of 66		. <u>10 DC3C</u>	iviaiii	
you	u d	in 1 year before you leal with your credit ot include any paymen	ors or to ma	ike payments	to your ci		ng on your behalf pa	y or transfer any _l	property to anyon	ne who į	oromised to he
∠	-	No Yes. Fill in the details.									
	1 '	res. I il ili tile details.			D	escription and	d value of any proper	ty transferred	Date payment or transfer was made	Amou	nt of payment
		Person Who Was Pai	id								
		Number Street									
		City	State	Zip Code							
ord Inc	din clud nsf	ary course of your I	business or ers and trans ady listed on	financial affa sfers made as	irs? security (s		erwise transfer any po			-	
	1 '	ics. i iii iii tiic detaiis.									
						escription and operty transfe	d value of any erred		property or paymebts paid in exch		Date transfe was made
		Person Who Receive	d Transfer								
		Person Who Receive Number Street	d Transfer								
			State	Zip Code	pr						
		Number Street City	State to you	Zip Code	pr						
		Number Street City Person's relationship	State to you	Zip Code	pr						
		Number Street City Person's relationship Person Who Receive	State to you d Transfer State	Zip Code	pr						
	ithi	Number Street City Person's relationship Person Who Receive Number Street City Person's relationship	State to you d Transfer State to you ou filed for	Zip Code	pr	operty transfe		received or de	ebts paid in exch	nange	was made
	ithi nes	Number Street City Person's relationship Person Who Receive Number Street City Person's relationship	State to you d Transfer State to you ou filed for set-protection	Zip Code	pr	operty transfe	erred	received or de	ebts paid in exch	nange	was made
	ithi nes	Number Street City Person's relationship Person Who Receive Number Street City Person's relationship in 10 years before your are often called assent	State to you d Transfer State to you ou filed for set-protection	Zip Code	id you trai	nsfer any prop	erred	received or de	ebts paid in exch	nange	

Debtor 1 Don Case 16-08070 First Name
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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

o In	r tra	in 1 year before you filed for bankruptcy, were ansferred? de checking, savings, money market, or other financeratives, associations, and other financial institution	cial accounts					
Ŀ		No Yes. Fill in the details.						
L		res. Fill in the details.	Last 4	digits of account er	Type of instrum	account or nent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	— XXXX-			ecking <i>r</i> ings		
		Number Street				ney market kerage ner		
		City State Zip Code						
		Person Who Was Paid	XXXX-			ecking vings		
		Number Street	_		Bro	ney market kerage		
					Oth	ner		
		City State Zip Code						
	alua	ou now have, or did you have within 1 year beforables? No Yes. Fill in the details.	·	had access to it?	y sale deposi	Describe the contents		Do you still have it?
		Name of Financial Institution	Name					☐ No ☐ Yes
		Number Street	Number	Street				☐ 163
			City	State	Zip Code			
22. H		City State Zip Code you stored property in a storage unit or place	other than	your home within 1	year before y	ou filed for bankruptcy	?	
[[<u> </u>	No Yes. Fill in the details.		•				
Ī			Who else	had access to it?		Describe the contents	3	Do you still have it?
		Name of Storage Facility	Name					☐ No ☐ Yes
		Number Street	Number	Street				
			City	State	Zip Code			
		City State Zip Code						

	otor 1	First Name Middle Name	Filed 03#	[≘] nt™ Pao	<u>ntered</u>	9/16/08:59: <u>10 Desc Mai</u>	n
Part		Identify Property You Hold or Control					
23.		you hold or control any property that someone No Yes. Fill in the details.	e else owns? I	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	ust for someone.
	_		Where is th	e property?		Describe the contents	Value
		Owner's Name	Number Stre	eet		-	
		Number Street				-	
			City	State	Zip Code	-	
		City State Zip Code	_				
Part	10:	Give Details About Environmental In	formation				
For	the p	urpose of Part 10, the following definitions apply:					
	ha in	nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear	nto the air, land, nup of these su	, soil, surface wa bstances, waste	ater, groundwater, es, or material.	, or other medium,	
		ite means any location, facility, or property as define used to own, operate, or utilize it, including dispos		vironmental law,	whether you now	own, operate, or utilize it	
Rep	to	lazardous material means anything an environment xic substance, hazardous material, pollutant, conta I notices, releases, and proceedings that you know	aminant, or simi	lar term.		substance,	
24.	Has	any governmental unit notified you that you n	nay be liable o	or potentially lia	able under or in	violation of an environmental law?	
	☑	No Yes. Fill in the details.					
			Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Government	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	-				
25.	Hav	e you notified any governmental unit of any re	lease of hazar	dous material	?		
		No Yes. Fill in the details.					
			Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Government	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				

Debtor	1	Don Case First Name	16-08070	Doc 1 Middle Name		Entered 03/09 Page 47 of 66	1608;59: <u>10</u>	Desc Main
26. H	lav	e you been a pa	arty in any judic	ial or administra	tive proceeding under a	ny environmental law	? Include settlements	and orders.
[7	No						
	_	Yes. Fill in the d	etails.		Court or agency		Nature of the case	Status of the
					Court or agency		nature of the case	case
		Case title						Pending
					Court Name	_		On appeal
					Number Street			Concluded
		Case number			City State	Zip Code		
Part 1	1.	Give Details	S About Your	Business or	Connections to Any	·	1	
27. V	Vitl	nin 4 years befo	ore you filed for	bankruptcy, did	you own a business or h	nave any of the follow	ing connections to any	/ business?
					orofession, or other activity or limited liability partners!	•	-time	
			n a partnership	ty company (LLC)	or inflited liability partiers	пір (ССР)		
		=		ging executive of a				
_		An owner o	of at least 5% of the	he voting or equity	securities of a corporation	1		
	4		above applies. G		below for each business.			
L	_	res. Crieck all ti	ат арргу ароче а	ria illi ili tile detalis		ure of the business	Employer Ide	entification number Do not
								al Security number or ITIN.
		Business Name	e				EIN:	
		Number Stre	et		Name of account	ant or bookkeeper	Dates busine	ss existed
		City	State	Zip Code	—	ant or bookkeeper	From	То
		City	Siale	Zip Code			1.16	
					Describe the natu	ure of the business		entification number Do not al Security number or ITIN.
		Business Name	е				EIN:	
		Number Stre	et		Name of account	ant or bookkeeper	Dates busine	ess existed
		0::	Otata	7'. 0. 1.	marrie or account	ant or bookkeeper	Erom	То
		City	State	Zip Code			FIGHT	10
					Describe the natu	ure of the business		entification number Do not all Security number or ITIN.
							EIN:	·
		Business Name	е					
		Number Stre	et		Name of account	ant or bookkeeper	Dates busine	ss existed
		City	State	Zip Code			From	To

	1 <u>Don</u> Case 16-0			Entered 03/09/16/08:59:10	Desc Main
	First Name	Middle Name	Document P	age 48 of 66	
	ithin 2 years before you feditors, or other parties.	iled for bankruptcy, d	id you give a financial state	ement to anyone about your business? In	clude all financial institutions,
<u>✓</u>	No Yes. Fill in the details bel	OW.			
	-		Date issued		
	Name		MM/DD/YYYY		
	Number Street				
	City S	State Zip Co	de		
Part 12:	Sign Below				
and	I correct. I understand th	at making a false stat	ement, concealing propert	hments, and I declare under penalty of per y, or obtaining money or property by fraud 20 years, or both. 18 U.S.C. §§ 152, 1341,	d in connection with a
	★ /s/ Don I	Hawkins		*	
	/s/ Don I			Signature of Debtor 2	
	Signature o				
Did	Signature o	f Debtor 1 2016	nt of Financial Affairs for Ir	Signature of Debtor 2	Form 107)?
Did	Signature o	f Debtor 1 2016	nt of Financial Affairs for Ir	Signature of Debtor 2 Date	Form 107)?
Did	Signature o Date 3/8/2 you attach additional pa	f Debtor 1 2016	nt of Financial Affairs for Ir	Signature of Debtor 2 Date	Form 107)?
✓	Signature o Date 3/8/2 you attach additional pa	f Debtor 1 2016 ges to Your Statemen	nt of Financial Affairs for Ir	Signature of Debtor 2 Date adividuals Filing for Bankruptcy (Official I	Form 107)?
✓	Signature o Date 3/8/2 you attach additional pa	f Debtor 1 2016 ges to Your Statemen		Signature of Debtor 2 Date adividuals Filing for Bankruptcy (Official I	Form 107)?
✓	Signature o Date 3/8/2 you attach additional pa No Yes you pay or agree to pay	f Debtor 1 2016 ges to Your Statemen		Signature of Debtor 2 Date adividuals Filing for Bankruptcy (Official I	Preparer's Notice,

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Don Hawkins		Case No.					
_	Debtor			(If known)				
			Chapter	Chapter 13				
	DISCLOSURE OF	COMPENSATION O	F ATTORNEY FOR DI	EBTOR				
1	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, c in connection w ith the bankruptcy case is as follow 	or agreed to be paid to me, for service						
	For legal services, I have agreed to accept							
	Prior to the filing of this statement I have received			\$350.00				
	Balance Due			\$3,650.00				
2	The source of the compensation paid to me was: Debtor	Other (specify)						
3	The source of the compensation paid to me is: Debtor	Other (specify)						
4	I have not agreed to share the above-disclose members and associates of my law firm.	ed compensation with any other person	n unless they are					
	I have agreed to share the above-disclosed or members or associates of my law firm. A copy the people sharing in the compensation, is at	y of the agreement, together with a lis						
5	In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation			in bankruptcy;				
	b. Preparation and filing of any petition, sche	edules, statements of affairs and plan	which may be required;					
	c. Representation of the debtor at the meeti	ng of creditors and confirmation hear	ing, and any adjourned hearings thereo	of;				
	d. Representation of the debtor in adversary	proceedings and other contested bar	nkruptcy matters;					
6	i. By agreement with the debtor(s), the above-disclos	sed fee does not include the following	services:					
		CERTIFICATION						
	I certify that the foregoing is a complete statement of ceedings.	any agreement or arrangement for pa	ayment to me for representation of the	debtor(s) in this bankruptcy				
	3/9/2016		/s/ Danielle Kancherlapalli					
	Date		Signature of Attorney					
			Semrad Law Firm					
			Name of law firm					

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 3/08/16

Do not sign this agreement if the amounts are blank.

Signed:	
Debtor(s)	Attorney for the Pebtor(s)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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Page 57 of 66 your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

> If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main UNITED STATES BANKBURTCY GOURT Northern District of Illinois

In re:	Hawkins, Don	Case No.	
_	Debtor(s)		
		Chapter. Chapter13	
	VERIFICAT	TION OF CREDITOR MATRIX	
	The above named Debtors hereby verify that the	ne attached list of creditors is true and correct to the best of	the best of their knowledge.
Date:	3/9/2016	/s/ Hawkins, Don	
		Hawkins Don	

Signature of Debtor

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IL DEPT OF HEALTHCARE 100 S GRAND AV EAST Springfield , IL 62705

Santander Consumer USA PO Box 961245 Fort Worth , TX 76161

ACCEPTANCE NOW 5501 Headquarters Dr ATTN: Acceptance Now Customer Service Plano , TX 75024

MIDSTATE COLLECTION SO 2009B Round Barn Rd Champaign , IL 61821

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107

IRS 1 PO Box 7346 Philadelphia , PA 19101

IRS 1 PO Box 7346 Philadelphia , PA 19101

Carpenter, Stacy Unknown Villa Park, IL 60181

Illinois Department of Human & Family Services 509 S. 6th St. Springfield , IL 62701

Carpenter, Stacy Unknown Villa Park , IL 60181

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604

PLS Loan Store 1900 Roosevelt Rd Broadview , IL 60155

Santander Consumer USA PO Box 961245 Fort Worth , TX 76161

Debtor 1 Don Case 16-0	nawk	/16 Entered 03/09/16 (08:59:10 Desc Main	
First Name		ame Page 62 of 66		
Part 6: Answer These Qu	estions for Reporting Purposes	L. I. 4 - O. O	to are defined in 11 II.S.C. & 101(8)	
16. What kind of debts do you have?	as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bu	primarily for a personal, family, isiness debts? Business debts or investment or through the or	s are debts that you incurred to peration of the business or	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors?	paid that funds will be available to No. Yes.		ty is excluded and administrative expenses are	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	LARVY - STATE AND ADMINISTRA
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 millior	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below				
For you	and correct. If I have chosen to file under Chap or 13 of title 11, United States Cod proceed under Chapter 7. If no attorney represents me and I fill out this document, I have obtain I request relief in accordance with I understand making a false statem	oter 7, I am aware that I may probe the I understand the relief availated in the last of the notice requires the chapter of title 11, United Second result in fines up to \$250, 519, and 3571.	roceed, if eligible, under Chapter 7, 11, able under each chapter, and I choose meone who is not an attorney to help in the dots of the best of the be	,12, to me
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	Case 16-08070	Doc 1 Filed	03/09/16	Entered 03/09/16	08:59:10	Desc Main
Fill in this inform	nation to identify your case					
Debtor 1	Don		Haw			
D 14 0	First Name	Middle Name	Last	Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last	Name		
United States B	ankruptcy Court for the:	Northern	District of			
Case number				(State)		
(If known)						Check if this is an
Official F	Form 106Dec					amended filing
Declarat	ion About ar	- Individual D	ebtor's	Schedules		12/15
				lying correct information.		
You must file th property by frau 1519, and 3571.	is form whenever you fil ıd in connection with a b	e bankruptcy schedules ankruptcy case can resu	or amended so alt in fines up to	chedules. Making a false st o \$250,000, or imprisonmer	atement, conceal t for up to 20 yea	ing property, or obtaining money or rs, or both. 18 U.S.C. §§ 152, 1341,
Part 1: Sign	Below					
Did you pa	ay or agree to pay some	one who is NOT an attorr	ney to help you	fill out bankruptcy forms?		Academic Constitution of the Constitution of t
✓ No						
Yes. N	lame of person			ch Bankruptcy Petition Prepai ature (Official Form 119).	er's Notice, Declai	ration, and
						Annual annual and annual
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and sche	dules filed with this declar	ition and	TAX more remarkable

Signature of Debtor 2

MM/DD/YYYY

Date

🗶 /s/ Don Hawkins

Date 3/8/2016

Signature of Debtor 1

MM/DD/YYYY

ebtor 1 <u>Do</u>	on Cas	se 16-0	8070	Doc 1	Filed Doc	03/09/16 UM G IName	Entere Page 6	ed 03/09/16 4 of 66	08:59:10	Desc Main
3. Within				bankruptcy, d		,			** **	nclude all financial institutions,
✓ No	o es. Fill in the	e details b	elow.							
						Date issued			-	
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_	City		State	Zip Co	de					
· ·	Jity		Outo	Z.p 00	40					
I have re	ign Belo	swers on	this State	ement of Fina	ancial Affa	irs and any at	tachments,	and I declare und	der penalty of pe	erjury that the answers are true
I have re	ead the an	swers on lerstand t can result	hat makin in fines u	ig a false stat	tement, co	ncealing prop	erty, or obta to 20 years	and I declare und aining money or s, or both. 18 U.S	property by frau	ıd in connection with a
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Deb	or 1	Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Mair Documest Name Page 65 of 66 number (if known)	<u> </u>
16.	Cal	culate the median family income that applies to you. Follow these steps:	er en en eur man de uit, in vere en reterment eur en managemente groupe en en en eur uit en
	16a.	Fill in the state in which you live.	
	16b.	Fill in the number of people in your household.	
		Fill in the median family income for your state and size of household	\$49,682.00
		To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.	
17.	Hov	do the lines compare?	
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).	
	17b.	17b. q Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.	
art	3:	Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)	
18.	Cop	y your total average monthly income from line 11.	\$6,754.33
19.	Ded	uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.	
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	-\$0.00
	19b.	Subtract line 19a from line 18.	\$6,754.33
20.	Calc	culate your current monthly income for the year. Follow these steps:	
	20a.	Copy line 19b.	\$6,754.33
		Multiply by 12 (the number of months in a year).	x 12
	20b.	The result is your current monthly income for the year for this part of the form.	\$81,051.96
	20c.	Copy the median family income for your state and size of household from line 16c.	\$49,682.00
21.		do the lines compare?	
		Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.	
	RECOUNT !	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The</i> commitment period is 5 years. Go to Part 4.	
art	4: 3	Sign Below	
		By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.	
		X /s/ Don Hawkins X	
		Signature of Debtor 2	
		Date 3/8/2016 Date MM/DD/YYYY	
		If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.	
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Case 16-08070 Doc 1 Filed 03/09/16 Entered 03/09/16 08:59:10 Desc Main **UNITED STAPLES BARKEUPS & COURT**

Northern District of Illinois

in re:	Hawkins, Don	Case No	
	Debtor(s)		
		Chapter. Chapter13	
	VERIFICA	TION OF CREDITOR MATRIX	
	The above named Debtors hereby verify that	the attached list of creditors is true and correct to the best of	heir knowledge.
Date:	3/8/2016	/s/ Hawkins, Don	
		Hawkins, Don Signature of Debtor	